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21091

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01/27/2006

CROMPTON SEAGER AND TUFTE, LLC
1221 NICOLLET AVENUE
SUITE 800
MINNEAPOLIS, MN 55403-2420

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Kathleen L. Boekley

(Depositor's name)

Kathleen L. Boekley

(Signature)

April 25, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/013,980

11/05/2001

Gust H. Hardy

04/25/2006 000001

3720

TITLE OF INVENTION: SUBCUTANEOUS ELECTRODE WITH IMPROVED CONTACT SHAPE FOR TRANSTHORACIC CONDUCTION

01 FC:1504

02 FC:2501

03 FC:8001

00000128

300.00 DA

700.00 DA

3.00 DA

500413

10013980

APPLN TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

YES

\$700

\$300

\$1000

04/27/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
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SCHAETZLE, KENNEDY

3766

607-116000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed

1. CROMPTON, SEAGER &

2. TUFTE, LLC

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cameron Health, Inc.

San Clemente, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies one (1)

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☐ A check in the amount of the fee(s) is enclosed☐ Payment by credit card Form PTO-2038 is attached☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0413 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

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NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

David M. Crompton

Date

4/25/06

Typed or printed name

David M. Crompton

Registration No.

36,772

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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T-371 P.01/03 F-129

CROMPTON | SEAGER | TUFTE | LLC

Patent, Trademark & Copyright Attorneys

1221 Nicollet Avenue, Suite 800
Minneapolis, Minnesota 55403-2420
Phone 612.677.9050
Fax 612.359.9349

FAX TRANSMISSION COVER LETTER

TO: Commissioner for Patents
Attn: Mail Stop Issue Fee
P.O. Box 1450
Alexandria, VA 22313-1450

DATE: April 25, 2006
FROM: David M. Crompton
OUR REF: 1201.1135101
TELEPHONE: 612-677-9050

Total pages, including cover letter: 3

PTO FAX NUMBER: 571-273-2885

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Title of Document(s) Transmitted: ISSUE FEE TRANSMITTAL IN DUPLICATE

Applicant: Gust H. Bardy et al.

Serial No.: 10/013,980

Filed: November 5, 2001

Group Art Unit: 3768

Our Ref. No.: 1201.1135101

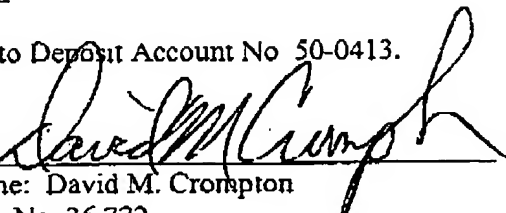
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Fee Code <u>1801</u>	<u>\$ 3</u>

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By: 
Name: David M. Crompton
Reg. No. 36,772

I hereby certify that this paper is being transmitted by facsimile to the U S Patent and Trademark Office on the date shown below.


Name: Kathleen L. Bockley

April 25, 2006
Date